

## Town of Fishkill Planning Department

Preliminary Layout Application for Subdivision & Resubdivision of Land page 1 of 3

FOR TOWN Application No.:	USE ONLY
Fees Paid: Application Fee: Escrow Deposit:	

Applicant's Information:	
Name:	_ Phone Number:
Address:	_ Fax Number:
Property Owner's Information:	_
Name:	_ Phone Number:
Address:	_ Fax Number:
If Corporation, give name of agent:	
Representative's Information:	
Name:	_ Phone Number:
Address:	_ Fax Number:
License No. (if applicable):	
Property's Grid No.: Map No.:	Lot No.:
Location of Property:	
This property is in the	Zoning District.
Number of lots proposed:	
Brief description of the Proposed Subdivis	ion or Resubdivision:



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10. Deed(s) recorded in the County Clerk's office: Date: Liber: Page:		
11. The Owner/Applicant has an interest in abutting property as stated below or on the attached sheet (If none, so state):		
12. Professional Engineer or Land Surveyor's Information:		
Name: 1	Phone Number:	
Address: F	Cax Number:	
License Number:		
13. Does owner propose to submit a Final Subdivision Plat to cover the entire Preliminary Layout, or file same in sections?:		
14. Does the Preliminary Layout cover the entire property holding of the Applicant?		
15. Does the Applicant propose to dedicate to the Town any or all streets and/or highways, which may be shown on the Preliminary Layout?		
16. Number of acres which the Applicant proposes to dedicate for public use for parks and/or playground purposes:		
17. Does the Applicant intend to request from the Board any waivers of the requirements of the Land Subdivision Regulations upon the submission of the Final Plat for approval? (If any waivers of these requirements are to be requested list them and give reasons why such requirements should be waived.)		
I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all the Town and County Ordinances and State laws regarding subdivision. I hereby authorize the Town of Fishkill Planning Board and/or Town of Fishkill Officials to enter and inspect this property at any reasonable hour of the day, including Saturday and Sunday.		
Owner's Signature:	Date:	
Applicant's Signature:	Date:	
Owner/Applicant's Signature:	Date:	



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Che	cklist (as may be applicable)	
Applicant's Name:		
Sub	division Plat Title:	
<u>Iten</u>		
1.	Preliminary Plat	22 Storm Drainage
2.	Applicant's Name(s)	23. Refuse Storage
3.	Applicant's Address(es)	24. <u> </u>
<b>4</b> .	Plat Preparer's Name	25 Water Supply
5.	Plat Preparer's Address	26 Sanitary Disposal System
6.	Drawing Date	27 Fire Hydrants
7.	Revision Date(s)	27 Fire Hydrants 28 Building Locations
8.	Area Map Inset	29 Building Setbacks
9.	Site Designation	30 Front Building Elevations
10.	Property owners within 500' of site	31 Divisions of occupancy
11.	Property owners (item #10)	32 Sign Details (include colors & samples)
12.	Plot Plan	33 Data Table Inset
	Scale	34. Property Area (nearest 100')
	Metes and Bounds	35 Building coverage (sq. ft.)
	Zoning Designation	36. Building coverage (% of total area)
16.	North Arrow	36 Building coverage (% of total area) 37 Pavement coverage (sq. ft.)
	Abutting Property Owners	38. Pavement coverage
- · ·	(item #10)	(% of total area)
18.		39 Open Space (sq. ft.)
19.	<ul><li>Existing Building Locations</li><li>Existing Paved Area</li></ul>	40. Open Space (% of total area)
20.	Existing Vegetation	41. Number of Parking Spaces Required
21.	Existing Access and Egress	42. Number of Parking Spaces Proposed
	POSED IMPROVEMENTS	OTHERS
43.	Landscaping	54
44.	Exterior Lighting	55
<b>45</b> .	Screening	56
<b>46</b> .	Existing Access and Egress	57
<b>47</b> .	Parking Areas	58
48.	Loading Areas	59
	Paving Details (item #'s 45 to 48)	60
50.	Curbing Locations	
51.	Curbing through section	
52.		
53.	Catch Basin through section	